DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: BELL THERAPY SILVER SPRING (310076)

Address: 7830 W SILVER SPRING DR, MILWAUKEE, WI 53218

License Status: REGULAR

Licensed/Certified/Registered 10/01/1989

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey His	torv
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Survey ID: 0095218 End Date: 06/02/2005 Type: OTHER Purpose: COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008817 Served 07/18/2005

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

83.21(4)(g) FAIR TREATMENT

83.31(2) SERVICES

83.32(2)(d) REVIEW OF PROGRESS

Survey ID: 0092591 End Date: 04/16/2004 Type: ABBREVIATED Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008987 Served 05/21/2004

Compliance

Deficiencies CitedSubject AreaVerifiedCorrected83.05(2)(b)CLASS A SEMIAMBULATORY (AS)03/30/2005Yes

83.41(1)(c)1 SIZE 03/30/2005 Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 07/15/2005 SOD #10008817 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

COMPLY WITH REQUIREMENT

OTHER SANCTION

FORFEITURE---83.21(4)(g); 83.31(2)

Date: 05/20/2004 SOD #10008987 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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